U.S. District Court for the Northern District Of Illinois Attorney Appearance Form

Case Title:		Case Nu	ımb	er:		
An appearance is here	eby filed by the unders	igned as	atto	orney for	:	
Attorney name (type o	or print):					
Firm:						
Street address:						
City/State/Zip:						
Bar ID Number: Telephone Number See item 3 in instructions)				Number		
Email Address:						
Are you acting as lead	I counsel in this case?				Yes	No
Are you acting as loca	I counsel in this case?				Yes	No
Are you a member of the court's trial bar?					Yes	No
If this case reaches trial, will you act as the trial attorney?				•	Yes	No
If this is a criminal cas		Retained Counsel				
			Appointed Counsel If appointed counsel, are you			
			а	Federa	l Defende	r
		CJA Panel Attorney				
general bar or be granted I declare under penalty of	his Court an attorney must eave to appear <i>pro hac vic</i> perjury that the foregoing is as the same force and effec	e as provide true and co	ed fo	or by local ct. Under 2	rules 83.12 28 U.S.C.§1	through 83.14. 746, this
Executed on						
Attorney signature:	S/	if the appea	aran	ce form is	filed electro	noically)
	(Use electronic signature if the appearance form is filed electronically.)					